

NORTH WALSHAM URBAN DISTRICT COUNCIL

REPORT OF

THE MEDICAL OFFICER OF HEALTH

FOR THE

YEAR ENDING DECEMBER 31ST. 1950

The Chairman and Members of the North Walsham Urban District Council.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present the Annual Report of the Medical Officer of Health for the year ending December 31st, 1950. No event occurred during the year of sufficient importance to be recorded in the preface to the report.

PRINCIPAL NOTES ON THE YEAR

The estimated population at mid-year was 4,696, as compared with 4,604 in 1949.

The Birth Rate was 15.5 per 1,000 of the estimated population (Eng: and Wales 15.8).

The Death Rate was 11.1 per 1,000 of the estimated population (Eng: and Wales 11.6). No death occurred in association with Childbirth. No Infectious Disease was notified during the last three months of the year. It is now over five years since a case of Poliomyelitis was reported.

The number of cases of Tuberculosis on the Register shows little change. Two new cases were notified.

GENERAL STATISTICS

Area in acres - 4,252.

Population (Registrar General's estimate) - 4,696.

Number of inhabited houses - 1,558.

Rateable Value at end of year - £23,509. 0. 0.

VITAL STATISTICS.

<u>Live Births.</u>	<u>Males</u>	<u>Females</u>	<u>Total</u>
Legitimate	33	38	71
Illegitimate	-	2	2
Total	33	40	73

The Birth Rate is 15.5 per 1,000 of the estimated population (Eng: and Wales 11.6). 2.7% of live births were illegitimate.

Still Births

Legitimate	1	-	1
Illegitimate	-	-	-
Total	1	-	1

The Still Birth Rate is 0.2 per 1,000 of the estimated population or 1.4% of all births.

DEATHS

The causes of Death were as follows:-

	Male	Female	Total
Tuberculosis of the Respiratory System	-	1	1
Other Tuberculosis	-	-	-
Syphilitic Diseases	-	-	-
Diphtheria	-	-	-
Whooping Cough	-	-	-
Meningococcal Infections	-	-	-
Acute Poliomyelitis	-	-	-
Measles	-	-	-
Other infective and parasitic diseases	-	-	-
Cancer of Stomach	-	-	-
Lung and Bronchial passages	1	-	1
Breast	-	-	-
Uterus	-	2	2
Other malignant and lymphatic growths	2	2	4
Leukaemia and Aleukaemia	-	-	-
Diabetes	2	-	2
Vascular Lesions of the Nervous System	3	3	6
Coronary disease and Angina	4	2	6
Hypertension with Heart Disease	2	1	3
Other Heart Disease	3	4	7
Other Circulatory Diseases	-	1	1
Influenza	1	-	1
Pneumonia	1	-	1
Bronchitis	2	-	2
Other diseases of the Respiratory System	1	-	1
Ulcer of the Stomach and Duodenum	-	-	-
Gastritis, Enteritis and Diarrhoea	-	-	-
Nephritis and Nephrosis	-	-	-
Hyperplasia of the Prostate	-	-	-
Pregnancy, Childbirth and Abortion	-	-	-
Congenital Malformations	-	-	-
Other diseases and illdefined disease	6	6	12
Motor Vehicle Accidents	-	-	-
All other accidents	1	-	1
Suicide	1	-	1
Homicide and operations of war	-	-	-
Total	30	22	52

The Death Rate is 11.1 per 1,000 of the estimated population. The causes of death cited above follow the usual pattern, Diseases of the Heart and Circulatory system heading the list followed by Cancer. No maternal Death occurred in association with Childbirth.

One death was reported under 1 year of age:- a legitimate female child. This child died in the first month of life.

INFECTIOUS DISEASES

The following table gives in the first column the number of cases of Infectious Diseases that were notified in 1950, and in the second column the number of cases that would have occurred if the Rate for England and Wales had applied:-

<u>Disease</u>	<u>A</u>	<u>B</u>
Acute Pneumonia	-	3
Diphtheria	-	.9
Erysipelas	-	.8
Food Poisoning	-	.8
Measles	7	39
Meningococcal Infections	-	.14
Paratyphoid	-	.05
Poliomyelitis	-	.8
Scarlet Fever	27	7
Smallpox	-	-
Typhoid Fever	-	-
Whooping Cough	27	17
Acute Encephalitis	-)	Figures not available
Chicken Pox	-)	
Dysentery	-)	
Glandular Fever	-)	
Infective Hepatitis	-)	
Malaria	-)	
Ophthalmia Neonatorum	-)	
Weil's Disease	-)	

These notifications, as they stand, are not especially remarkable, apart from the low incidence of Measles. They were, however, remarkable in that no case of Infectious Disease was notified during the months of October, November and December, when the winter peak is normally being approached.

Once again no case of Diphtheria was reported, a tribute to the results of Immunisation. In the country as a whole the drop in notifications in the last ten years has been tremendous, from over 50,000 in 1941 to under 2,000 last year.

The small total for Measles is surprising and satisfactory in view of the large total for the rest of the County.

The absence of Poliomyelitis is also satisfactory. It is now over five years since a case was reported in North Walsham.

The Scarlet Fever total is relatively high owing to the occurrence of a number of mild cases in the early part of the year. In only one case did a complication occur, and this was in association with an ear which had previously given trouble. This type of Scarlet Fever is far removed from the severe disease which was usual a generation ago.

Whooping Cough was very common in the County as a whole during the year. It is important to exercise care for some weeks after the disease has abated, since its debilitating effects may last some time after recovery. The 27 cases reported do not indicate a very severe epidemic.

TUBERCULOSIS

Two new cases of Tuberculosis were notified during the year, both of them Pulmonary. The case rate for Pulmonary Tuberculosis is therefore 0.43, and that the Nonpulmonary 0.0. The corresponding figures for the administrative County of Norfolk were 0.64 and 0.25. There was one death from Pulmonary Tuberculosis during the year, giving a Death Rate of 0.22. This compares with a Rate of 0.19 for the Administrative County of Norfolk. There was no death from Nonpulmonary Tuberculosis, thus the Death Rate for all forms of Tuberculosis was also 0.22. The Rate for England and Wales as a whole was 0.36.

The number of cases on the Register on December 31st, 1950. was as follows:-

	<u>Pulmonary</u>	<u>Nonpulmonary</u>	<u>Total</u>
Male	6	2	8
Female	4	4	8
Total	10	6	16

Previous years gave the following figures:-

<u>1949.</u>	Male	4	2	6
	Female	5	5	10
<u>1948.</u>	Male	3	2	5
	Female	6	5	11
<u>1947.</u>	Male	2	2	4
	Female	5	5	10

In addition to the 2 new cases notified one other case was added to the Register. This was a transfer from another district.

NATIONAL ASSISTANCE ACT, 1948. SECTION 47 - No action was necessary under this Section during the year.

HOUSING - Housing continues to present, as elsewhere in the country a difficult problem. Restrictions on building continue and it is hard to see how more can be done in the erection of Council Houses until these are modified. Twenty-nine houses were built by the Council during the year.

SANITARY CIRCUMSTANCES OF AREA.WATER

Source Water is obtained from underground workings in the chalk deposits, via well or borehole, and is pumped to water towers nearby.

Quality The water is of excellent bacteriological and organic quality, but precautionary chlorination has been carried out. Filtering is used to remove excess iron from the water. The total hardness remains at about 17.6°.

Tests Apparently no general analysis was made during the year, but the result of bacteriological examination showed the probable number of Coliform bacilli at 2 days Mac Conkey to be nil (@ 37°C) and the water is therefore satisfactory.

Plumbo Solvency The water does not produce a plumbo-solvent action.

Contamination No contamination of the public supply has been noted during the year.

Modes of Supply to Population Over 96% of the population is supplied with water from the Council's mains, the remainder being mainly in widely scattered farms and cottages. During the year several farms and cottages received main supply.

DRAINAGE AND SEWERAGE

The separate system is mainly in use and at present about 75% of properties are served. It is expected that this percentage will soon be substantially increased by the execution of proposals for the further extension to the sewerage system that the Council has had in view for at least twenty years.

The sewage disposal plant has been in operation for many years, and at the present is overload. The results, bearing this in mind, have been reasonably satisfactory.

A tender has been accepted and a starting date (January 1st 1951) fixed for the reconstruction of this plant.

Pollution - Rivers and Streams No reports of such pollution were received during the year.

Closet Accommodation In small and old properties the closet and bathroom accommodation is not good, especially in the outlying areas. However up to a dozen conversions were carried out during the year.

DISPOSAL OF REFUSE

Household refuse is collected weekly in the central area and bi-weekly elsewhere. A modern hygienic vehicle is used. Disposal is to controlled tip.

CLEANSING OF STREETS

This is carried out manually by permanent staff and a reasonably high standard is maintained.

WATER SUPPLY & SANITARY CONDITIONS OF SCHOOLS

All schools are provided with main water supply and sewerage facilities.

FACTORIES ACT

Ten changes of occupation were recorded. No special action was taken under the act.

SANITARY INSPECTIONS

Food Poisoning There were no cases of food poisoning.

Condemned Foods The following foodstuffs were found to be unfit for human food and condemned:-

Canned Foods

Milk - 32 tins; Vegetables - 121 tins; Fruit - 7 tins; Preserves - 3 tins; Tomato Purée - 2201 Kilos; Ham - 60 lbs; Canned Meats - 40 tins; Corn Beef or Mutton - 53 lbs.

Confectionery - 2 tins; Wet Fish - $10\frac{1}{2}$ stones; Fresh beef sausages - 12 lbs; Hard Cheese - $93\frac{1}{2}$ lbs; Butchers Meat - 26 lbs.

Routine inspections were carried out at food premises.

Ice Cream Three samples are recorded, falling into Provisional grades I, II and III respectively. The grade III sample was manufactured outside the district.

Housing Inspection A number of houses were inspected and informal notices were served on the persons having control of the dwellings to execute repairs where necessary.

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

Public Health Officers to the Local Authority.

Medical Officer of Health

J.H.F. Norbury, M.B.B.S., M.R.C.S., L.R.C.P., D.P.H.

Wholetime: the post is combined with that of Medical Officer of Health for Cromer, Sheringham and the Erpingham Rural District, and Assistant County Medical Officer to the Norfolk County Council.

Sanitary Inspector - Mr. J. A. Yates,
M.I.MUN.E., M.S.I.A.

As a result of the National Health Service Act, which came into operation in 1948, Health Services are provided almost entirely by official bodies. There is a limited amount of private practice.

The official bodies are four in number.

1. The Norfolk Executive Council.

This provides the General Practitioner, Dental Pharmaceutical and Ophthalmic Services.

2. The Regional Hospital Board.

The country as a whole has been divided into Regions, and the Regions into areas, for administrative purposes. The Erpingham Rural District lies in the East Anglian Region, and the Cromer Area. Cromer and District Hospital is the General Hospital for the area, and provides specialist out-patient clinics for patients from anywhere within the area.

2. The Regional Hospital Board (Cont'd)

The Sanatoria at Kelling, near Holt, are also administered by the Regional Hospital Board, as are the Fletcher Convalescent Home at Cromer, and the Longacre Maternity Home at West Runton.

At present Infectious Diseases are treated at East Dereham Isolation Hospital, a distance of some 30 miles from many parts of the district. This cannot be regarded as entirely satisfactory, but the authorities have promised that the former Isolation Hospital, Roughton, near Cromer, will be re-opened if there are sufficient cases in the district to warrant it.

3. The County Council.

The County Council provides through its various departments:-

(a) The School Medical Service.

All schools in the Area are visited at least once during the year. At these visits a systematic examination of entrants 5, 8 and 10 year-olds and leavers is carried out; arrangements are made for the treatment of defects found. All children previously found to have defects are also examined, and any not otherwise due to be examined who appear to require it. Special examinations are made of handicapped children, where necessary in their homes.

Minor Ailment Clinics are held weekly at North Walsham and fortnightly at Cromer and Sheringham to serve these towns and the surrounding districts.

Children not included in a school for any reason are also examined at home. Examination is also made of children when transport to school is believed necessary on medical grounds.

(b) The Maternity and Child Welfare Service.

An Infant Welfare Centre is held monthly at Holt and North Walsham and fortnightly at Cromer and Sheringham. Village Centres are held monthly at Banningham, Corpusty, Edgefield, Gresham, Matlaske, Northropps, Roughton, Southropps and Trimmingham. Immunisation and Vaccination are carried out at all centres at least quarterly.

(c) Health Visiting

All children under 5 are visited regularly in their homes by a Health Visitor. In most cases the duty of Health Visiting is carried out by the local District Nurse-Midwife. She also attends the Welfare Centres in her area, and not infrequently assists at neighbouring ones. Children over 5 come under the supervision of the School Nurse.

(d) Midwifery

This is performed by the District Nurse-Midwives and the general practitioner-obstetricians in the proportion of approximately 2 to 3. In this district the Longacre Maternity Home and Beckham House are available for confinements where domiciliary confinement is considered undesirable.

(e) Home Nursing

This is carried out by the District Nurse-Midwives under the Norfolk County Nursing Association, who act as agents for the County Council.

(f) Vaccination and Immunisation

This is carried out by general practitioners acting for the County Council, and by the Assistant County Medical Officer. In the case of children facilities are provided at the Infant Welfare Centres and, in the case of immunisation, at the schools as well.

(g) Ambulance Services

These are carried out by the St. John's Ambulance Brigade acting as agents for the County Council.

(h) General Measures for the Prevention of Illness, Care, and After-Care including the provision of Nursing Equipment.(i) Home Helps.(j) Mental Health Services(k) General Welfare Services under the supervision of the welfare Officer.

He visits North Walsham on Thursday mornings at 11.a.m. and is available for interview at that time.

4. The Rural District Council

The District Council, is, as ever, responsible for the control of Infectious Diseases and Environmental Health and Hygiene, acting mainly through the Medical Officer of Health and the Sanitary Inspectors.

Note:- Laboratory Services are provided at the Public Health Laboratory, Bowthorpe Road, Norwich, by the Ministry of Health.

In conclusion I must express my thanks to Mr. Yates for the invaluable help he has given in the preparation of this report.

I have the honour to be

Your obedient servant,

J. H. F. NORBURY.

M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.